WODKEDS!	COMPENISATION	DECLADATIO	IA

WORKERS' COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compension Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. 2569-81 Company
Certified copy is hereby furnished.
Certified copy is filed with the county building inspection department.
Date 7/26/82 Applicant BOUL
CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)
I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.
DateApplicant
NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.
LICENSED CONTRACTORS DECLARATION I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.
License Number 403450 Lic. Class
Contractor Date 7/2 10/4 2
I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).
Lic. or Reg. No Date
OWNER-BUILDER DECLARATION
I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):
I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).
CONSTRUCTION LENDING AGENCY I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).
Lender's Name
Lender's Address
I certify that I have read this application and state that the above information is correct. I agree to comply with all County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

	*	BUILDING	and the same of th	and the same		7.	
FOR APPLICANT TO FILL IN	BUILDING ADDRESS						
BUILDING 1539 FISHBURN A	16.	LOCALITY					
CITY LOS ANGELES ZIP 900	NEAREST CROSS ST.						
NO. OF BLDGS. SIZE OF LOT NOW ON LOT	ASSESSOR MAP BOOK PAGE PARCEL						
	1	USE ZONE	MAP	L. Garage	1	Trincet .	
TRACT BLOCK LOT NO.	-20PO	1012	NO.				
OWNER IN THE STATE OF THE STATE		DISTRICT	GROUP	TYPE	FIRE	PROCESSED BY	
ADDRESS A TO FISH BUILDING		()		CONST.	ZONE	1/2/10/85	
CITY LOT RNGELET GA ZIP 9 16	57	STATISTICAL C	LASSIFICAT	ION	1927	APT. CONDO.	
ARCHITECT OR TEL. ENGINEER NO.		CLASS NO	man d	_DWELL. UN	NITS	ATT. COMBO.	
ADDRESS (2/3)		SEWER /	MAP				
	3996	BK.	PG, 4	7		VALIDATION	
ADDRESS 282 61/1 57 ST NO. 417	450	VALUATION	ON				
CITY LOS DACCAS CA CLASS C			70.0	Ö .			
SQ. FT. NO. OF NO. OF STORIES FAMILIES	CHECK ONE						
	EW 🗍	\$50	200	7			
A A	DD	/	001	X			
(2) Variet Spray Booths	LTER	FINAL					
USE OF	EPAIR	DATE				#5083A	
EXISTING BLDG.	EMOL .	FINAL By				#101010123	
APPLICANT TEL. (PRINT) NO.							
ADDRESS						1.693825	
PRESENT BUILDING						99.3925	
ADDRESS	200					97.28-82	
LOCALITY						1,41,41,111,114,14,14,14	
MOVING TEL. CONTRACTOR NO.						85084A	
ADDRESS						#	
REQUIRED YARD HWY TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH	A Part of				11-5550	
FRONT PL							
SIDE							
P.L.						2728582	
P.C. Fee \$ Permit Fee	0						
1000	10,38						
Issuance Fee							

SEE REVERSE FOR EXPLANATORY LANGUAGE

Total Fee